

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below)
or an original, first and joint inventor (if plural names are listed below)
of the subject matter which is claimed and for which a patent is sought on the invention
entitled: **INSECT SODIUM CHANNELS FROM INSECTICIDE-SUSCEPTIBLE AND
INSECTICIDE-RESISTANT HOUSE FLIES**

the specification of which (check only one item below):

☒ is attached hereto.

☐ was filed as United States application

Serial No. _____

on _____

and was amended

on _____

(if applicable).

☐ was filed as PCT international application

Number _____

on _____

and was amended under PCT Article 19

on _____

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specifications, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (IF PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
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			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check One)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
08/608,618	March 1, 1996		X	
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)
Susan J. Braman, Reg. No. 34,103, Michael L. Goldman, Reg. No. 30,727, Thomas Fitzgerald, Reg. No. 36,136, Gunnar Leinberg, Reg. No. 35,584, Peter Rogalskyj, Reg. No. 38,601, Karla Weyand, Reg. No. 40,223

Send Correspondence to: Susan J. Braman, Esq.
Nixon, Hargrave, Devans & Doyle LLP
Clinton Square, P.O. Box 1051
Rochester, New York 14603

Direct Telephone Calls to:
(name and telephone number)
Susan J. Braman
(716) 263-1636

1 0 3 6 5	FULL NAME OF INVENTOR	FAMILY NAME SODERLUND	FIRST GIVEN NAME DAVID	SECOND GIVEN NAME M.
	RESIDENCE & CITIZENSHIP	CITY GENEVA	STATE/FOREIGN COUNTRY NEW YORK	COUNTRY OF CITIZENSHIP USA
	POST OFFICE ADDRESS	P.O. ADDRESS 664 CASTLE STREET	CITY GENEVA	STATE & ZIP CODE/COUNTRY NEW YORK 14456/USA
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME KNIPPLE	FIRST GIVEN NAME DOUGLAS	SECOND GIVEN NAME C.
	RESIDENCE & CITIZENSHIP	CITY GENEVA	STATE/FOREIGN COUNTRY NEW YORK	COUNTRY OF CITIZENSHIP USA
	POST OFFICE ADDRESS	P.O. ADDRESS 109 MAXWELL AVENUE	CITY GENEVA	STATE & ZIP CODE/COUNTRY NEW YORK 14456/USA
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME INGLES	FIRST GIVEN NAME PATRICIA	SECOND GIVEN NAME J.
	RESIDENCE & CITIZENSHIP	CITY GENEVA	STATE/FOREIGN COUNTRY NEW YORK	COUNTRY OF CITIZENSHIP GREAT BRITAIN
	POST OFFICE ADDRESS	P.O. ADDRESS 85 HUMBERT STREET	CITY GENEVA	STATE & ZIP CODE/COUNTRY NEW YORK 14456/USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

As a below named inventor, I hereby declare that:

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **INSECT SODIUM CHANNELS FROM INSECTICIDE-SUSCEPTIBLE AND INSECTICIDE-RESISTANT HOUSE FLIES**

the specification of which (check only one item below):

☐ is attached hereto.

☒ was filed as United States application

Serial No. 08/772,512

on December 24, 1996

☐ was filed as PCT international application

Number _____

on _____

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specifications, including the claims, as amended by any amendment referred to above.

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Rochester, New York 14603

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(name and telephone number)
Susan J. Braman
(716) 263-1636

10229	FULL NAME OF INVENTOR	FAMILY NAME SODERLUND	FIRST GIVEN NAME DAVID	SECOND GIVEN NAME M.
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	RESIDENCE & CITIZENSHIP	CITY GENEVA	STATE/FOREIGN COUNTRY NEW YORK	COUNTRY OF CITIZENSHIP USA
	POST OFFICE ADDRESS	P.O. ADDRESS 109 MAXWELL AVENUE	CITY GENEVA	STATE & ZIP CODE/COUNTRY NEW YORK 14456/USA
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	RESIDENCE & CITIZENSHIP	CITY GENEVA	STATE/FOREIGN COUNTRY NEW YORK	COUNTRY OF CITIZENSHIP GREAT BRITAIN
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SIGNATURE OF INVENTOR 201 <i>Soderlund</i>	SIGNATURE OF INVENTOR 202 <i>Knipple</i>	SIGNATURE OF INVENTOR 203 <i>Ingles</i>
DATE March 12, 1997	DATE Mar 12 1997	DATE March 12 1997